

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 3 0 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Bruce A.	Berke, Simon P. Thom	son and Erle B. Pierce	
II. Name of lobbyist's partnership,	irm or corporation, if any:		
Sheehan Phinney Capitol Grou	p		
	o, firm or corporation)		
Two Eagle Square	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
603) 228-2370 (603) 224-8899 cmail bberke@sheehan.com, sthomson@sheehan.com, cpierce@sheehan.com			
III. This statement covers: (Choose reportable expense transactions whi	ch are not attributable to a	iny one client).	
All reportable transactions occurr	ing in the month prior to the	reporting date relative to the	following client:
American Staffing Association			
OR All reportable transactions by the unrelated to any particular client.		the Lobbyist Registration Fo	•
IV. Date of Report April 25, 20 Reports cover: activity from date of October 31, activity from 7/1/6 V. There have been no fees received	registration to 3/31/18 2018 [] 8 to 9/30/18 and no reportable transact		1/18 oort. ⊠
If this box is checked, complete just the Concord, NH 03301.	s form and submit it to the S	ecretary of State's Office, Sta	te riouse, Room 204,
If you have paid an honorari Expense Reimbursement	made expenditures, you mus um or reimbursed expenses,	et file Addendum A– Fees an you must file Addendum B–	d Expenses Report of Honorariums or
Sworn Statement/Affirmation by Lo I have read RSA 15, RSA 15-B and R the best of my knowledge and belief.		affirm that the foregoing info	rmation is true and complete to
(Signature of lobbyist)	N.Cha	January 30, 2019 Erliz Phirce (Date)	<u>. </u>
Bruce A. Berke, Simon P. Thou (Print Name of lobbyist)	nson and Erle B. Pierce	<u>; </u>	